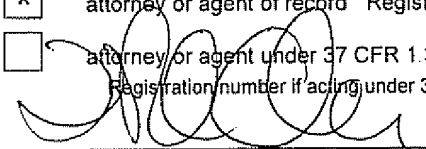


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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 2091-0302P	
Application Number 10/727,546-Conf. #7320		Filed December 5, 2003	
For IMAGING DEVICE, TERMINAL DEVICE, AND IMAGING SYSTEM			
Art Unit 2609		Examiner C K Peterson	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 \$ 120.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input type="checkbox"/>	Applicant claims small entity status See 37 CFR 1.27		
<input type="checkbox"/>	A check in the amount of the fee is enclosed		
<input type="checkbox"/>	Payment by credit card Form PTO-2038 is attached		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 I have enclosed a duplicate copy of this sheet		
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)			
<input checked="" type="checkbox"/> attorney or agent of record Registration Number 29,680			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34 Registration number if acting under 37 CFR 1.34			
 Signature		June 29, 2007 Date	
Michael K. Mutter Typed or printed name		(703) 205-8000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below			
<input type="checkbox"/> Total of 1 forms are submitted			